

## UNITED STATES BANKRUPTCY COURT

In re HRH Construction, LLC,

Case No. 09-23665 (RDD)  
(Jointly Administered)

### TRANSFER OF CLAIM OTHER THAN FOR SECURITY

A CLAIM HAS BEEN FILED IN THIS CASE or deemed filed under 11 U.S.C. § 1111(a). Transferee hereby gives evidence and notice pursuant to Rule 3001(e)(2), Fed. R. Bankr. P., of the transfer, other than for security, of the claim referenced in this evidence and notice.

Metal Lathers Union Local 46

Name of Transferee

K.E.B. Pest Control

Name of Transferor

Name and Address where notices to transferee  
should be sent: Kennedy, Jennik & Murray, P.C.  
113 University Place, 7th Fl.  
New York, NY

Court Claim # (if known): \_\_\_\_\_  
Amount of Claim: 1246.31  
Date Claim Filed: 9/28/09

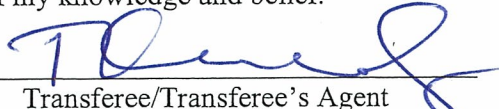
Phone: 212-358-1500  
Last Four Digits of Acct #: \_\_\_\_\_

Phone: 914-793-7900  
Last Four Digits of Acct. #: \_\_\_\_\_

Name and Address where transferee payments  
should be sent (if different from above):

Phone: \_\_\_\_\_  
Last Four Digits of Acct #: \_\_\_\_\_

I declare under penalty of perjury that the information provided in this notice is true and correct to the best of my knowledge and belief.

By:   
Transferee/Transferee's Agent

Date: 7/23/10

**EXHIBIT**

**A**

### EVIDENCE OF TRANSFER OF CLAIM

K.E.B. PEST CONTROL, LLC, it successors and assigns (collectively "Assignor"), pursuant to the Transfer of Claim Agreement dated September 28, 2009, has hereby absolutely and unconditionally sold, transferred and assigned to Metal Lathers Union Local 46, its successors and assigns (collectively "Assignee") the general unsecured claim (the "Claim"), in the amount of \$1,246.31 against HRH Construction, LLC (the "debtor") in the bankruptcy proceedings (the "proceedings") in the United States Bankruptcy Court for the Southern District of New York, case no. 09-23665 (RDD)(Jointly Administered) or any other court with jurisdiction over such proceedings.

Assignor hereby waives any notice or hearings requirements imposed by Rule 3001 of the Bankruptcy Rules, and stipulates that an order may be entered recognizing the assignment of this Claim as an unconditional assignment and Assignee as the valid owner of the Claim.

IN WITNESS WHEREOF, Assignor has duly executed this Evidence of Transfer of Claim by its duly authorized representative this July 23rd day of July 2010.

**(Assignor)**

KEB Pest Control

By: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

**(Assignee)**

Metal Lathers Union Local 46

By: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

**(Assignor)**

Witness:

By: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

UNITED STATES BANKRUPTCY COURT Southern District of New York		PROOF OF CLAIM
Name of Debtor: HRH Construction LLC	Case Number: 09-23665 (rdd)	
NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A request for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.		
Name of Creditor (the person or other entity to whom the debtor owes money or property): K.E.B. PEST CONTROL, LLC	<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim.  Court Claim Number: _____ (If known)  Filed on: _____	
Name and address where notices should be sent: K.E.B. PEST CONTROL, LLC 35 EAST GRASSY SPRAIN RD. SUITE 305 YONKERS, NY 10710-4618	<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.  <input type="checkbox"/> Check this box if you are the debtor or trustee in this case.	
Telephone number: 914 293-7900	<input type="checkbox"/> Check this box if you are the debtor or trustee in this case.	
Name and address where payment should be sent (if different from above):	<input type="checkbox"/> Check this box if you are the debtor or trustee in this case.	
Telephone number:	<input type="checkbox"/> Check this box if you are the debtor or trustee in this case.	
1. Amount of Claim as of Date Case Filed: \$ 1246.31	5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount.  Specify the priority of the claim.  <input type="checkbox"/> Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B).  <input type="checkbox"/> Wages, salaries, or commissions (up to \$10,950*) earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. §507 (a)(4).  <input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. §507 (a)(5).  <input type="checkbox"/> Up to \$2,425* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. §507 (a)(7).  <input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. §507 (a)(8).  <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. §507 (a)(9).	
If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4.  If all or part of your claim is entitled to priority, complete item 5.	Amount entitled to priority: \$ 1246.31	
<input type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.	*Amounts are subject to adjustment on 4/1/10 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.	
2. Basis for Claim: SERVICES PERFORMED (See instruction #2 on reverse side.)	SEP 29 2009	
3. Last four digits of any number by which creditor identifies debtor: N/A	Amount entitled to priority: \$ 1246.31	
3a. Debtor may have scheduled account as: N/A (See instruction #3a on reverse side.)	SEP 29 2009	
4. Secured Claim (See instruction #4 on reverse side.) Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information.  Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe:  Value of Property: \$ _____ Annual Interest Rate: %  Amount of arrearage and other charges as of time case filed included in secured claim, if any: \$ _____ Basis for perfection: _____  Amount of Secured Claim: \$ _____ Amount Unsecured: \$ _____	SEP 29 2009	
6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.	SEP 29 2009	
7. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See instruction 7 and definition of "redacted" on reverse side.)  DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.  If the documents are not available, please explain:	SEP 29 2009	
Date: 9/28/09	Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any. Edwin Beltran Mangin	FOR COURT USE ONLY

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both, 18 U.S.C. §§ 152 and 3571.

**K.E.B. Pest Control, LLC**

35 East Grassy Sprain Rd Suite 305  
Yonkers, NY 10710  
Tel 914 793-7900  
Fax 914 793-8989

**Invoice**

Date	Due Date	Invoice #
5/14/2008	6/13/2008	17923

Bill To
Steve Venditti HRH Construction 50 Main St. /15th Floor White Plains, NY 10606

Amount Enclosed	\$
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(Please return top portion with payment)

Date	Due Date	Invoice #
5/14/2008	6/13/2008	17923

Description		Amount
Pest Control Service		400.00
Target Pests: Rats		
Service Address: HRH Construction 100 W 18th Street New York, NY 10003		
Visit for May Sales Tax		33.50
Please write invoice(s) number on your check. Thank you for your business.		
<b>Invoice Total</b>		<b>\$433.50</b>
<b>Customer Total Balance To-Date</b>	<b>\$1,246.31</b>	

**K.E.B. Pest Control, LLC**

35 East Grassy Sprain Rd Suite 305  
Yonkers, NY 10710  
Tel 914 793-7900  
Fax 914 793-8989

**Invoice**

Date	Due Date	Invoice #
4/30/2008	5/30/2008	17541

Bill To
Steve Venditti HRH Construction 50 Main St. /15th Floor White Plains, NY 10606

Amount Enclosed	\$
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(Please return top portion with payment)

Date	Due Date	Invoice #
4/30/2008	5/30/2008	17541

Description		Amount
Regular Service		750.00
Service Address: HRH Construction 100 W 18th Street New York, NY 10003		
For April Visit Sales Tax		62.81
Please write invoice number on your check. Thank you for your business.		
<b>Invoice Total</b>		<b>\$812.81</b>
<b>Customer Total Balance To-Date</b>	<b>\$1,246.31</b>	